





Water Resources Program Application for a Water Right Permit

rollow the	attached instructions. Attach addi	tional sneets as n	ecessary.
*A NON-REFUNDABLE M	IINIMUM FEE OF \$50.00 MUS	T ACCOMPAN	Y THIS APPLICATION.
Section 1. APPLICAN	Γ		
Applicant/Business Name: Gary West		Phone No: 360 886 /	Other No:
Address: (32999 Paci	fic st	State:	Zip:
Black Diamon Email Address (optional):	J	Was	98010
Sindii Mudicos (optional).			
Contact Name (if different from ab	ove):	Phone No:	Other No:
Relationship to Applicant:			
Address:			
City:		State:	Zip:
Email Address (optional):		*	
Legal Land Owner or Part Owner	Name of the Proposed Place of Use:	Phone No: 360 886	Other No:
Address: 1 32999 Pacif	c st		
City: Black Diam	ond	State: U/a 5	4 Zip: 98010
Email Address (optional):			
Section 2. STATEMEN	T OF INTENT		
	our proposed project: <u>Purchase wa</u> Water Right Change Application N	4.16 P. C. L	
ater for the West Lot #96.	Tutor regint change reprise to a		ender of the provide dollars.
nticipated length of time to con	nplete your project: Water distribu	tion system is exi	sting.
Vater Use List all purposes for	which water will be applied to a be	eneficial use and	list quantity required for each
Purpose(s) of Use	Rate (check one box only) Cubic Feet per Second (CFS) Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Domestic-single	8	1004	Seasonal

Priority Date _

By_

7.14.2010 By

Date Returned

WRIA: 39

	TO	TAL:						
s this a request this request fyes to eiter ROM: Section (Complete	m/Temporary	water U term properties ove, ind TO: OF D C below	oject (le nit? icate the	YES N Ne dates that	t the water w	ill be needed:		
							ther:	
Spring ☐ Creek ☐ River ☐ Lake ☐ Other: ☐ Source Name: No name ☐ Tributary to: Lake Kachess Number of proposed diversion points:1 ☐ Do you have an existing diversion? ☑ YES ☐ NO					Num Do y	Well diameter & depth: Number of proposed points of withdrawal: Do you have an existing well? YES NO If available, attach Water Well Report and pump test Well Tag ID No		
C.) Point	t of Diversion	/Withd	rawal -	- Legal D				
	rcel No. 56835	1/4 NW	1/4 NE	Section 21	Township 21	Range 13	County Kittitas	
I	Lot(s)		Block(s	s)	Si	ubdivision		
300 Fee from the (et (North/ SW SW SW No.	South) a	and 1490	0 feet	(☐ East/ ⊠	West)	I to the nearest section corner:	
I	Lot(s)		Block(s	s)	Sı	ubdivision		
feet from the (OOTE: If more from the you own from the you own from the you own frow the from the you own from the young fro	t (North/ SW SW ore than two point the land on who have legal au	South) a NE NE thich the thority to, address	propose o make s, and p	feet () corn thdrawal at ed point of this applic hone numb	East/ Wes	al information thdrawal is lo	I to the nearest section corner: on a separate sheet of paper. ocated? YES NO land? YES NO Owners, %Robin Morissey, 7224 N	
707 30								
			•	- Symmetry purpose with the		-		
Section	4. PLACE	OF U	SE					
Section For Ecology Use	APPLICATION N	O:					SEPA: Exempt/Not Exempt Coding: 001-001-WR1-0285-000011	

300k 4		ges 23 and 24			ounty of Kittitas, State of Washington, a	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
1/4	1/4	Section	Twp.	Range	County	Parcel No.
NW	NE	21	21	13	Kittitas	
o you o	own all the	lands on w	which the p	proposed p	place of use is located? XYES	NO.
no, do	you have	legal authorie(s), addre	rity to ma	ke this app	plication for use of another's land?	☐ YES ☐ NO
ovide	owner nan	ie(s), addre	ss, and pr	ione numo	OCI.	
re there	e any other	water righ	ts or clain	ns associa	ted with this property or water syste	em? ☐ YES ☒ NO
yes, pr	ovide the	water right	and/or cla	aim numbe	ers:	
		3				
					nt of diversion/withdrawal and pla	ce of use. If platted proper
e sure	to include	a complete	e copy of	the plat n	nap.	
ection	n 5. WA	ATER S	YSTEM	1 DESC	CRIPTION	
eccrine	Vour pror	nced water	evetem (i	include tyr	ne and size of devices used to divert	or withdraw water from
					pe and size of devices used to divert	
ource):	The existing	ng water sy	stem cons	sists of a 2	plastic pipe that diverts water to	a go gallon water storage tan
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	JSES
<u>Irrigation</u>	
Total number of acres requested to be irrigated under this application = 0 ACI NOTE: Outline the area to be irrigated on your attached map.	RES
Stockwater	
List number and kind of stock: 0	
Is the proposed project for a dairy farm? ☐ YES ☒ NO	
Other Proposed Farm Uses Describe all proposed uses: No other uses	
Family Farm Water Act (RCW 90.66):	
 Calculate the acreage in which you have a controlling interest, including only: Acreage irrigated under water rights acquired after December 8, 1977, Acreage proposed to be irrigated under this application, and Acreage proposed to be irrigated under other pending application(s). 	
Is the combined acreage under existing rights greater than 6000 acres? YES N	10
Do you have a controlling interest in a Family Farm Development Permit? YES [NO
If yes, enter Permit No:	
Section 8. OTHER WATER USES	
Hydropower	
Indicate total feet of head and proposed capacity in kilowatts:	_
Describe works:	
Y. J	
Indicate all uses to which power is to be applied: FERC License No:	
Mining/Industrial Use Describe use, method of supplying and utilizing water:	
Other Use	
None	

Will you be using a dam, dike, or	other structure to retain or store water?	YES NO	
Are you proposing to store more the	han 10 acre-feet of water? TYES NO		
Will the water depth be 10 feet or	more? YES NO		
If you answered yes to any of the	above questions, please describe: There is	in existing ?? gallon storage tank at the	
spring.			
	feet or more of water and/or if the water depth be above grade, you must also complete an App ermit and Application.		
Section 10. DRIVING D	DIRECTIONS		
Provide detailed driving directions	s to the project site: Take exit 70 off of Inte	rstate 90. Turn north and drive to	
Sparks Road on the north side of I	-90. Drive 0.08 miles west on Sparks Roa	and turn right on Kachess Dam Road.	
Drive 4 miles on Kachess Dam roa	ad to gate 6650. Turn left at gate 6650, dri	ve down the hill and turn left to Lot 96.	
Site Address: ??? Kachess LN, Eas	ton, WA		
Section 11. REQUIRED	SIGNATURES		
Print Name (Applicant or authorized represent	Signature Signature	Date $\frac{7/i1/20}{20}$	
Print Name (Legal Owner or Part Owner Place	Signature of Use)	Date	
Print Name	Signature	Date	
(Legal Owner or Part Owner Place			
Print Name (Legal Owner or Part Owner Place	Signature of Use)	Date	
	Please check the region in	which the project is located:	
*Submit your application to: DEPARTMENT OF ECOLOGY	Central Regional Office 15 W Yakima Avenue, Suite 200	Eastern Regional Office 4601 N. Monroe	
CASHIERING SECTION PO BOX 47611	Yakima, WA 98902 (509) 575-2490	Spokane, WA 99205-1295 (509) 329-3400	
OLYMPIA, WA 98504-7611	Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300	